

United States District Court

DISTRICT OF

David P. Fontaine (Pro Se Litigant)

SUMMONS IN A CIVIL CASE

V.

CASE NUMBER: 04-30080-MAP

U. S., Internal Revenue Service, Commissioner of IRS,
IRS Employees - Sheila O'Brien, Lynn Walsh, Jane B. Finnegan, Larry Leder, and Dennis Parizek,
State of CT, CT Dept of Rev. Svcs, CDORS Commissioner, Governor John Rowland, CT Comm. Gene Gavi
State of MA, MA Dept of Revenue, MA Commissioner of Revenue

TO: (Name and address of defendant)

Internal Revenue Service, c/o Commissioner Mark W. Everson
1111 Constitution Ave N.W.,
Washington, DC 20224

YOU ARE HEREBY SUMMONED and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

David P. Fontaine (Pro Se Litigant)
68 Van Horn St.
West Springfield, MA 01089

an answer to the complaint which is herewith served upon you, within sixty (60) days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.

TONY ANASTAS

CLERK

(BY) DEPUTY CLERK

DATE

April 29, 2004

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Internal Revenue Service
c/o Commissioner Mark W. Everson
1111 Constitution Ave N.W.
Washington, DC 20224
RE: Fed Court Case # 04-30080-MAP
(4)

2. Article Number
(Transfer from service label)

PS Form 3811, August 2001

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Received by the

☐ Agent

☐ Addressee

B. ~~Received by the~~ Commissioner's Correspondence Office

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☐ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

7002 3150 0002 2103 3919

Domestic Return Receipt

102595-02-M-1540

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DISTRICT OF

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TONY ANASTAS

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DATE

April 29 2004

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<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature X</p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>
<p>1. Article Addressed to:</p> <p>IRS Office of the Commissioner c/o Commissioner Mark W. Everson 1111 Constitution Ave N.W. Washington, DC 20224 RE: Fed Court Case # 04-30080-MAP (5)</p>	<p>B. Received by (Printed Name) Commissioner's Correspondence Office</p> <p>C. Date of Delivery MAY 06 2004</p> <p>D. Is delivery address different from item 1? If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>2. Article Number (Transfer from service label)</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input checked="" type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. </p>
	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

7002 3150 0002 2103 3902

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540